

Action History (UTC-06:00) Central Time (US & Canada)

by Workflow 12/10/2020 10:39:46 AM (Workflow Start Event)

Approve

by Amundson, Travis 12/10/2020 2:22:08 PM (Mayor's Office Board/Comm)

- The task was assigned to Amundson, Travis 12/10/2020 10:39 AM



## Ethics Disclosure Form

**First Name \***

Kristin

**Last Name \***

Robinson

**Position Held \***

Board/Commission Member

**Personal / Work Email**

krislucille@gmail.com

**Address \***

Street Address

1617 4th ST NW

Address Line 2

Apt. 301

City

Rochester

Postal / Zip Code

55901

State / Province / Region

MN

Country

USA

**Are you employed by the City of Rochester? \***

- ☐ Yes  
☒ No

**Do you serve on a volunteer Board/Commission? \***

- ☒ Yes  
☐ No

### City of Rochester Volunteers

Name of Board/Commission On Which You Serve Or Are Date Appointed Or Date Application Was Filed For Seeking Appointment \*

Library Board

Position \*

12/07/2020

**Do you have any interests in real property in Rochester other than your homestead? \***

- ☐ Yes  
☒ No

**Do you have any interest in a business doing business with the City? \***

- ☐ Yes  
☒ No

**Do you have any interest in a business located within, or doing business in, the City. \***

- ☐ Yes  
☒ No

**List any and all employment. \***

American Board of Physical Medicine and Rehabilitation - Maintenance of Certification Assistant

**Are you a member of a community, civic, or nonprofit organization? \***

- ☐ Yes  
☒ No

Signature \*

Sign

Date \*

12/10/2020